



1FW 1625
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant :	D. Dube, et al.	.
Serial No. :	10/534,582	Case MCO73YP
Filed :	May 11, 2005	Art Unit: 1625
For :	4-OXO-1-(3-SUBSTITUTED PHENYL-1,4-DIHYDRO-1,8-NAPHTHYRIDINE-3-CARBOXAMIDE PHOSPHODIESTERASE-4 INHIBITORS	Ex: N. Rahmanj.

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Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

RESPONSE TO ADVISORY ACTION

Dear Sir:

This is in response to the Advisory Action of August 10, 2007, for which a response was due September 21, 2007. Applicants herein submit simultaneously with this response a Request for a one month extension of time. Reconsideration of applicant's claims is requested. Any additional fees required in connection with this response may be taken from Merck Deposit account no. 13-2755. Please amend the application as follows:

AMENDMENTS TO THE CLAIMS begins on page 2 of this paper.

REMARKS begin on page 9 of this paper.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date appearing below.

MERCK & CO., INC.

By Christine M. Jones Date 10/10/07



PATENT
CASE NO. MC073YP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: DUBE ET AL.

Serial No. 10/534,582

Filed May 11, 2005

Group Art Unit 1625

Examiner Niloofar Rahmani

For: 4-OXO-1-(3-SUBSTITUTED
PHENYL-1,4-DIHYDRO-1,8-NAPHTHYRIDINE-3-CARBOXAMID
E PHOSPHODIESTERASE-4 INHIBITORS

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>11</u>	-	** <u>31</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>3</u>	-	*** <u>3</u> =	<u>0</u> X	\$210	= <u>0.00</u>
Multiple Dependent Claims					\$370 ****	= <u> </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,

By: Sylvia A. Ayler
Attorney for Applicant(s)

Reg. No. 36,436

MERCK & CO., INC.
Patent Dept., RY60-30
P.O. Box 2000
Rahway, N.J. 07065-0907

(732) 594-4909

Date: October 10, 2007

IN DUPLICATE